

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED  
FEC MAIL CENTER  
2016 MAR 15 AM 10:34

Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Nils Palsson for Congress 2016

ADDRESS (number and street)

10617 Sycamore Road



(Check if address  
is changed)

Middletown

CA

95461

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

Palsson2016@deaneandcompany.com



(Check if address  
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address  
is changed)

2. DATE

MM / DD / YYYY  
03 / 10 / 2016

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Shawnda Deane

Signature of Treasurer

Date

MM / DD / YYYY  
03 / 14 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Nils Palsson

Candidate Party Affiliation

DEM

Office Sought:

☒

House

☐

Senate

☐

President

State

CA

District

05

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

**Party Committee:**

- (d) ☐ This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

- |    |                      |               |                      |
|----|----------------------|---------------|----------------------|
| 1. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 2. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 3. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 4. | <input type="text"/> | FEC ID number | <input type="text"/> |

Write or Type Committee Name

Nils Palsson for Congress 2016

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Shawnda Deane

Mailing Address

1787 Tribute Road, Suite K

Sacramento

CA

95815

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

916

285

5733

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

Shawnda Deane

Mailing Address

1787 Tribute Road, Suite K

Sacramento

CA

95815

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

916

285

5733

Full Name of  
Designated  
Agent

Nils Palsson

Mailing Address

10617 Sycamore Road

Middletown

CITY

CA

STATE

95461

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

415

646

5630

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Community 1st Bank

Mailing Address

2250 Douglas Blvd., Suite 190

Roseville

CITY

CA

STATE

95661

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

<https://www.fedex.com/shipping/html/en/PrintFrame.html>

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2016 MAR 16 10:34

**X**<sup>®</sup>  
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ORIGIN ID: BLUA (916) 285-5733  
MADISON CAJUELAN  
DEANE & COMPANY  
1787 TRIBUTE ROAD, SUITE K

SACRAMENTO, CA 95815  
UNITED STATES US

SHIP DATE: 14MAR16  
ACTWGT: 0.50 LB  
CAD: 105557870/INET3730

BILL SENDER

TO **FEDERAL ELECTION COMMISSION**

**999 E STREET NW**

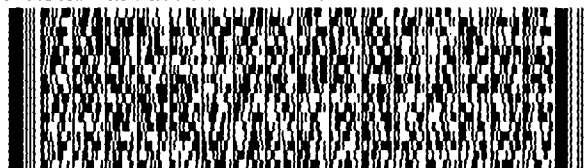
**WASHINGTON DC 20463**

(916) 285-5733  
INV:  
PO:

REF: PALSSON 2016 16-027

DEPT:

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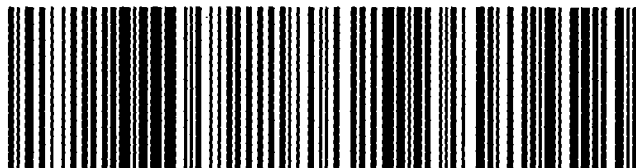
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**TUE - 15 MAR 10:30A**  
**PRIORITY OVERNIGHT**

TRK#  
0201 **7758 6957 3295**

**XC RDVA**

**20463**  
DC-US **IAD**



**Extremely Urgent**

Federal Election Commission  
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

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☐ USPS Priority Mail Postmarked

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☐ No Postmark

☒ Overnight Delivery Service (Specify): *fed Ex* Shipping Date *3/14/16*

Next Business Day Delivery ☒

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked

*PR*  
PREPARER

*3/15/16*  
DATE PREPARED